



Combined Declaration for Patent Application and Power of Attorney

As a below-named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name; and that I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

CAROTENOID EXTRACTION PROCESS

the specification of which (check one)

- [] is attached hereto;
[X] was filed in the United States under 35 U.S.C. §111 on _____, as
U.S. Appln. No. 09/944,105*; or
[] was/will be filed in the U.S. under 35 U.S.C. §371 by entry into the U.S. national stage of an international
(PCT) application, PCT/_____; filed _____, entry requested on
_____, national stage application received U.S. Appln. No. _____; §371/§102(e)
date _____ (* if known)

and was amended on: _____ (if applicable).
(include dates of amendments under PCT Art. 19 and 34 if PCT)

I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above; and I acknowledge the duty to disclose to the Patent and Trademark Office (PTO) all information known by me to be material to patentability as defined in 37 C.F.R. §1.56.

I hereby claim foreign priority benefits under 35 U.S.C. §§ 119 (a)-(d) and 365 (b) of any prior foreign application(s) for patent or inventor's certificate, or §365(a) of any prior PCT application(s) designating a country other than the U.S., listed below with the "Yes" box checked, and have also identified below, by checking the "No" box, any foreign application for patent or inventor's certificate or PCT international application having a filing date before that of the application on which priority is claimed:

_____ (Number)	_____ (Country)	_____ (Day Month Year Filed)	[] YES	[] NO
_____ (Number)	_____ (Country)	_____ (Day Month Year Filed)	[] YES	[] NO

I hereby claim the benefit under 35 U.S.C. §119(e) of any United States provisional applications listed below:

_____ (Application No.)	_____ (Day Month Year Filed)
_____ (Application No.)	_____ (Day Month Year Filed)

I hereby claim the benefit under 35 U.S.C. §120 of any prior U.S. non-provisional application(s) or under §365(c) of any prior PCT international application(s) designating the U.S., listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in such U.S. or PCT international application in the manner provided by the first paragraph of 35 U.S.C. §112, I acknowledge the duty to disclose to the PTO all information which is material to patentability as defined in 37 C.F.R. §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:

_____ (Application No.)	_____ (Day Month Year Filed)	_____ (Status: patented, pending, abandoned)
_____ (Application No.)	_____ (Day Month Year Filed)	_____ (Status: patented, pending, abandoned)

As a named inventor, I hereby appoint the following registered practitioners to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

All of the practitioners associated with Customer Number 001444

Direct all correspondence to the address associated with Customer Number 001444, which is presently:

BROWDY AND NEIMARK, P.L.L.C.
624 Ninth Street, N.W.
Washington, D.C. 20001-5303
(202) 628-5197

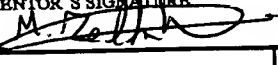

The undersigned hereby authorizes the U.S. Attorneys or Agents appointed herein to accept and follow instructions from LYCORED NATURAL PRODUCTS INDUSTRIES LTAs to any action to be taken in the U.S. Patent and Trademark Office regarding this application without direct communication between the U.S. Attorneys or Agents and the undersigned. In the event of a change of the persons from whom instructions may be taken, the U.S. Attorneys or Agents appointed herein will be so notified by the undersigned.

Title: CAROTENIOD EXTRACTION PROCESS

U.S. Application filed _____ Serial No. _____

PCT Application filed _____ Serial No. _____

I hereby further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. §1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

FULL NAME OF FIRST INVENTOR Morris ZELKHA		INVENTOR'S SIGNATURE 	DATE 20.1.2002
RESIDENCE 10 Hadar Street		CITIZENSHIP ISRAEL	
POST OFFICE ADDRESS 84965 Omer, ISRAEL			
FULL NAME OF SECOND JOINT INVENTOR Tanya SEDLOV		INVENTOR'S SIGNATURE 	DATE 20.1.2002
RESIDENCE Mivtsa Moshe 25/6		CITIZENSHIP ISRAEL	
POST OFFICE ADDRESS 84196 Beer Sheva, ISRAEL			
FULL NAME OF THIRD JOINT INVENTOR		INVENTOR'S SIGNATURE	DATE
RESIDENCE		CITIZENSHIP	
POST OFFICE ADDRESS			
FULL NAME OF FOURTH JOINT INVENTOR		INVENTOR'S SIGNATURE	DATE
RESIDENCE		CITIZENSHIP	
POST OFFICE ADDRESS			
FULL NAME OF FIFTH JOINT INVENTOR		INVENTOR'S SIGNATURE	DATE
RESIDENCE		CITIZENSHIP	
POST OFFICE ADDRESS			
FULL NAME OF SIXTH JOINT INVENTOR		INVENTOR'S SIGNATURE	DATE
RESIDENCE		CITIZENSHIP	
POST OFFICE ADDRESS			
FULL NAME OF SEVENTH JOINT INVENTOR		INVENTOR'S SIGNATURE	DATE
RESIDENCE		CITIZENSHIP	
POST OFFICE ADDRESS			

ALL INVENTORS MUST REVIEW APPLICATION AND DECLARATION BEFORE SIGNING. ALL ALTERATIONS MUST BE INITIALED AND DATED BY ALL INVENTORS PRIOR TO EXECUTION. NO ALTERATIONS CAN BE MADE AFTER THE DECLARATION IS SIGNED. ALL PAGES OF DECLARATION MUST BE SEEN BY ALL INVENTORS.